

May 3 0 P.O. Box 747 • Falls Church, Virginia 22040-0747 2001 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

ATTORNEY DOCKET NO. 0933-0176P

(Status -- patented, pending, abandoned)

(Status - patented, pending, abandoned)

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

## SOMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

FOLLOWING:								
•	As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Insert Title:	Method for Gene Transfect	tion Using Synergis	tic Combinations of (	<u>Cationic Lip</u> ids				
Insert Title:	the specification of which is attached hereto. If not attached hereto,							
Fill in Appropriate	the specification was filed on			as				
Information —	United States Application Number	r		<b>;</b>				
For Use Without	and amended on		(if applica	able); and/or				
Specification	the specification was filed on			as PCT				
Attached:	International Application Number	r		_; and was				
	amended under PCT Article 19 on		(i	f applicable)				
	I hereby state that I have reviewed and u	understand the contents of the above	e identified specification, including the	ne claims, as amended				
	I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.							
	I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.							
	I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:  Prior Foreign Application(s)  Priority Claimed							
Insert Priority Information:				. 💭 📙				
(if appropriate)	(Number)	(Country)	(Month / Day / Year Filed)	Yes No				
				− ☐ ☐ − Yes No				
	(Number)	(Country)	(Month / Day / Year Filed)					
				Yes No				
	(Number)	(Country)	(Month / Day / Year Filed)					
	(Number)	(Country)	(Month / Day / Year Filed)	- Yes No				
	I hereby claim the benefit under Title 35, U	United States Code, §119(e) of any	United States provisional applicatio	n(s) listed below.				
Insert Provisional Application(s):	(A	(F	(Filing Date)					
	(Application Number) (Filing Date)							
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:							
	Country	Application Number	Date of Filing (Month	h / Day / Year)				
Insert Requested Information:  (if appropriate)	Finland	20001584	7/3/2000	·				
· ·				/ N. 11. 1				
	I hereby claim the benefit under Title 35, insofar as the subject matter of each of the in the manner provided by the first paragraph which is material to patentability as defined	claims of this application is not di aph of Title 35. United States Coo	isclosed in the prior United States and de. §112. I acknowledge the duty to	id/or PCT application disclose information				

date of the prior application and the national or PCT international filing date of this application:

(Filing Date)

(Filing Date)

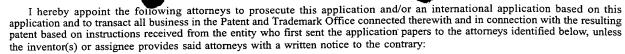
(Application Number)

(Application Number)

Page 1 of 2

(if any)

Insert Prior U.S. Application(s): →



Raymond C. Stewart	(Reg. No. 21,066)	Terrell C. Birch	(Reg. No. 19,382)
Joseph A. Kolasch	(Reg. No. 22,463)	James M. Slattery	(Reg. No. 28,380)
Bernard L. Sweeney	(Reg. No. 24,448)	Michael K Mutter	(Reg. No. 29,680)
Charles Gorenstein	(Reg. No. 29,271)	Gerald M. Murphy, Jr.	(Reg. No. 28,977)
Leonard R. Svensson	(Reg. No. 30,330)	Terry L. Clark	(Reg. No. 32,644)
Andrew D. Meikle	(Reg. No. 32,868)	Marc S. Weiner	(Reg. No. 32,181)
Joe McKinney Muncy	(Reg. No. 32,334)	John A. Castellano	(Reg. No. 35,094)
Donald I Daley	(Reg. No. 34,313)	John W. Bailey	(Reg. No. 32,881)

Send Correspondence to:

## BIRCH, STEWART, KOLASCH & BIRCH, LLP or Customer No. 2292

P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such statements may jeopardize the validity of the application or any patent issued thereon.

₩ '	willful faise statements	may jeopardize the variatty of					
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE		DATE*		
nsert Name of Inventor	Atso	RAASMAJA	Ho famon		hov9, zoy		
nsert Date This Document is Signed	Residence (City, State & C	ountry)		CITIZENSHIP			
nsert Residence	Kuopio, Finland Finnis						
nsert Cuzensrup  nsert Post Office  Address	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
	Verhiöpolku 6 A 2, FIN-70280 KUOPIO, FINLAND						
Full Name of Second Inventor, if any: see above	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE		DATE*		
	Pasi	LAMPELA	Var-log		9.11.2001		
	Residence (City, State & C	·		CITIZENSHIP	_		
	Kuopio, Fi			Finni	sh		
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
	Retkeilijäntie 5 <del>B 9</del> , FIN-70200 KUOPIO, FINLAND						
Full Name of Third Inventor, if any see above	OR THINIAN IT	FAMILYNAME	INVENTOR'S SIGNATURE		DATE*		
	GWENNAME Pekka T.	MÄNNISTÖ	A S ——		Moral Som		
				CITIZENSHIP	pov3,200		
	hesidence (City, State & Country)		1 -	Finnish			
			City State & Country)	1 111111	511		
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
	Kiuruntie 22, FIN-70340 KUOPIO, FINLAND						
Full Name of Fourth Inventor, if any	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE		DATE*		
see above	GIVENTANIE	17 441111 44111					
	Residence (City, State & C	ountry)		CITIZENSHIP			
:	nesidence (City, State & C	ourid y)					
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
	, , , , , , , , , , , , , , , , , , , ,						
	_						
Full Name of Fifth Inventor, if any	GIVEN NAME	FAMILYNAME	INVENTOR'S SIGNATURE		DATE*		
see above				CITIZENSHIP	<u> </u>		
	Residence (City, State & Country)						
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)						
	· ·						
Page 2 of 2							

(Revised 11-99)